FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington	DC 2	0549	

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Si	ee Instruction	10.																			
Name and Address of Reporting Person* Weber Steven			2. Issuer Name and Ticker or Trading Symbol IGM Biosciences, Inc. [IGMS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner											
WCOCI	<u>Steven</u>																tor er (give title		10% Ov Other (s		
<i>a</i> 0			. 4											_		below			below)	specily	
' '	(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)								PRINCIPAL ACCOUNTING OFFICER									
C/O IGM BIOSCIENCES, INC.			12/16/2024																		
325 E. MIDDLEFIELD ROAD																					
			4. If Amendment, Date of Original Filed (Month/Day/Year)							6.	Individual or Joint/Group Filing (Check Applicable										
(Street)											`	-	,	Lii	Line)						
MOUNT	'AIN C	A 9	94043														filed by One		•	- 1	
VIEW															Form filed by More than One Reporting Person						
,																0100	,,,				
(City)	(S	tate) (Zip)																		
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	efici	ally C)wn	ed				
1. Title of	Security (Ins	str. 3)		2. Transac											7. Nature						
Date (Month/Da			y/Year) Execution Date, if any (Month/Day/Year		•	Transaction Code (Instr. 3, 5) Code (Instr. 3, 5)		3, 4 a	Benefi Owned		icially (D)) or Indirect (Instr. 4)	of Indirect Beneficial Ownership							
								Code	v	Amount	(A)	or	Price	Т		ed ction(s) 3 and 4)			(Instr. 4)		
Common Stock 12/16/			12/16/2	2024				S ⁽¹⁾		539]	D	\$7.4	8(2)	31	1,704		D			
		Та	ble II -	Derivati	ve Se	curit	ties A	Acau	ired. [Disp	osed of,	or B	ene	ficia	lv Ov	vnec					
											onvertib										
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		f g lnstr.	8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nu of	mber ares							

Explanation of Responses:

- 1. These shares were sold to cover tax withholding obligations in connection with the vesting of restricted stock units.
- 2. This transaction was executed in multiple trades at prices ranging from \$7.00 to \$7.84. The price reported above reflects the weighted average sale price. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer full information regarding the number of shares sold at each separate sale price.

/s/ Misbah Tahir, by power of attorney

12/18/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.